



JC10 Rec'd PCT/PTO 31 DEC 2001

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S&H Form: PTO/SB/17 (2/01)

RESPONSE TO NOTIFICATION OF MISSING REQUIREMENTS		Attorney Docket No. 1454.1102														
		Application Number 09/937,708														
		I.A. Filing Date March 20, 2000														
		First Named Inventor Knut ADAMS et al.														
		Group Art Unit														
Title:	DEVICE AND METHOD FOR MOBILE DATA COLLECTION															
<p>Pursuant to 37 C.F.R. § 1.53(f) and in response to the U.S. Patent and Trademark Office Notice to File Missing Parts of Nonprovisional Application mailed <u>November 9, 2001</u> for the above-identified application, enclosed are the following:</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Executed Combined Declaration/Power of Attorney executed by the inventor for completing the missing parts of the subject application. The undersigned registered attorney states that the subject application is the application which the inventor executed by signing the attached Declaration.<input type="checkbox"/> Formal Drawings (_____ Sheets; Figs. _____)<input type="checkbox"/> English-language translation of application (with Translator's Statement (pages _____))<input type="checkbox"/> Verified Statement Claiming Small Entity Status																
<p>Enclosed is a payment of the following:</p> <table><tbody><tr><td><input type="checkbox"/> The filing fee as set forth in 37 C.F.R. § 1.16(a)</td><td>\$</td></tr><tr><td><input type="checkbox"/> The additional claim(s) fee (claims over 20)</td><td>\$</td></tr><tr><td><input type="checkbox"/> The additional independent claim(s) fee (claims over 3)</td><td>\$</td></tr><tr><td><input type="checkbox"/> Multiple dependent claims</td><td>\$</td></tr><tr><td><input type="checkbox"/> Petition for Extension of Time (_____ -month)</td><td>\$</td></tr><tr><td><input type="checkbox"/> English language translation fee</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Surcharge as set forth in 37 C.F.R. § 1.16(e)</td><td>\$130.00</td></tr></tbody></table>			<input type="checkbox"/> The filing fee as set forth in 37 C.F.R. § 1.16(a)	\$	<input type="checkbox"/> The additional claim(s) fee (claims over 20)	\$	<input type="checkbox"/> The additional independent claim(s) fee (claims over 3)	\$	<input type="checkbox"/> Multiple dependent claims	\$	<input type="checkbox"/> Petition for Extension of Time (_____ -month)	\$	<input type="checkbox"/> English language translation fee	\$	<input checked="" type="checkbox"/> Surcharge as set forth in 37 C.F.R. § 1.16(e)	\$130.00
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<input type="checkbox"/> English language translation fee	\$															
<input checked="" type="checkbox"/> Surcharge as set forth in 37 C.F.R. § 1.16(e)	\$130.00															
SUBTOTAL FEES: \$130.00																
<input type="checkbox"/> Reduction by 50% for filing by small entity (37 CFR 1.27) .00																
01/08/2002 MNNGUYEN 00000086 09937708		SUBTOTAL FEES: \$130.00														
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TOTAL FEES DUE: \$130.00																

Since the Notice to File Missing Parts of Nonprovisional Application set an original due date of ___, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$110)); (2 months (\$400)); (3 months (\$920)); (4 months (\$1,440)); (5 months (\$1,960));

METHOD OF PAYMENT

Check enclosed as payment.
 Charge "TOTAL FEES DUE" to the Deposit Account No. 19-3935, below.

AUTHORIZATION

If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 CFR 1.16 or 1.17 necessary to maintain pendency of the present application to:

Deposit Account No.: 19-3935

Deposit Account Name: STAAS & HALSEY LLP

SUBMITTED BY: STAAS & HALSEY LLP

Typed Name	Richard A. Gollhofer	Reg. No.	31,106
Signature	<i>Richard A. Gollhofer</i>	Date	12/31/01